

CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITIVE 8 EAST

RECEIVED

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION	
A1. Name of Committee/Conduit (in full) Shann Pfeff Friends of Shann Pfeff	
A2. Committee/Conduit ID Number (if applicable) A3. Email A6. Email	studence (608/618-5275
As. Mailing Address 5843 Schomen, Dr Flelburg	A7. State A8. Zip
SECTION B: REPORT INFORMATION	
B1. Report Type (Choose One) January Continuing	Special Pre-Primary Special Pre-Election Special Post-Election
Reporting Period The start date for your campaign finance report should be the day following the end date of your previous campaign finance, Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1.	B3. Reporting Period Start Date Classification of the start Date B4. Reporting Period End Date
Review the filing calendar with reporting periods online at: https://Ethics.wi.gov/FilingCalendar	
Party and Legislative Campaign Committees Only B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) General Fund Segregated Fund	
SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)	
Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year, Candidates may not claim exemption in the year of their election before the day they appear on the ballot.	C1. Exemption Request and Affirmation Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. No, this registrant is not requesting exemption
SECTION D: CERTIFICATION	
I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis, Stat. § 11.0103(3)(d).	
Authorized Representative D1. Printed Name Sharn / FH Sharn / FH D2. Signature	D3. Date 7 [6/19